FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated average	ge burden
hours per respon	se16.00

	SEC US	SE ONLY
Pr	efix	Serial
	DATE P	ECEIVED
		}

Name of Offering (check if this is an amendment and name has changed, and indicate change.)
AMERICAN KIOSK CORPORATION
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
AMERICAN KIOSK CORPORATION
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
2859 Virginia Beach Blvd., Suite 105, Virginia Beach, Virginia 23452
Address of Principal Business Operations (Number and Street Experimental Principal Business Operations (if different from Executive Offices) Number and Street Experimental Principal Business Operations (Number and Street Experimental Principal Business (Number and Street Experimental Business (Number and Street Experimental Business (Number and Street Experimental Busi
Brief Description of Business OCT 2 0 2005 SEC MAIL
Type of Business Organization
Type of Business Organization Corporation Dusiness trust Corporation Dusiness trust Dimited partnership, already formed FINANCIAL FINANC
Month Year
Actual or Estimated Date of Incorporation or Organization: [OIS 977 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION —
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filling of a federal notice.
Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. 1 of 9

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Palacios, Martin A. Business or Residence Address (Number and Street, City, State, Zip Code) 2859 Virginia Beach Blvd., Suite 105, Virginia Beach, Virginia 23452 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: General and/or. Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B, L	VFORMÂT	ION ABOU	T OFFERI	NG 🚓 🔊		(Get () / Let (X)		10 to
ı U.	+b.a.	isauer aald	or does th	a iomar i	stand to ca	II to non o	ooredited i	nvastora in	this offer	na)		Yes	No F
I. Ha	is the	issuel solu,	, or udes ti							-			X
2. W	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?										s 0.0	0	
					55 4550	prod zrom.			••••••			Yes	No
3. Do	es the	offering p	ermit join	t ownershi	p of a sing	le unit?	•						
	Enter the information requested for each person who has been or will be paid or given, directly or indirectly,												
Ifa	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offeri If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a st								with a state				
		, list the nar or dealer,								ciated pers	ons of such		•
		ast name f											
					<u>.</u>								
Busine	ss or I	Residence A	Address (N	umber and	l Street, Ci	ty, State, Z	Zip Code)						
Name o	of Ass	ociated Bro	ker or De	aler							·		
States i	n Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					·	
		'All States'										□ All	States
Ā	רד	AK	AZ	ĀR	CA	CO	CT	DE	[DC]	FL	[GA]	HI	[ID]
		IN]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
M	T	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
R	I	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Na	ame (I	ast name f	irst, if indi	vidual)									
Busine	ss or	Residence .	Address ()	Number an	d Street C	ity State	Zin Code)						
2.20						,,,	p	•					
Name o	of Ass	ociated Bro	oker or De	aler									
States i	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
		'All States'							·····		•••••	☐ Al	l States
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M	프	NE	NV	NH	NJ .	NM	NY	NC	ND	OH)	OK	OR	PA
R	I	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Na	ame (I	ast name f	irst, if indi	vidual)						·			
													
Busine	ss or	Residence	Address (P	Number an	d Street, C	ity, State,	Zip Code)						•
Name o	of Ass	ociated Bro	oker or De	aler			· · · · · · · · · · · · · · · · · · ·						
States i	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	·			- -		
		'All States'							***************************************		***************************************	_ Al	l States
A	L	AK	ĀZ	AR	CA	CO	CT	DE .	DC	FL	GA	HI	ID
		N.	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
M		NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
R		SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	· ·	
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$_90,000.00	\$ 90,000.00
	✓ Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests	\$	\$
	Other (Specify)		<u>\$</u>
	Total	\$_90,000.00	\$ 90,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	2	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ 90,000.00
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)	- 	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securitie sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Doilar Amount Sold
	Rule 505	^	\$ 0.00
	Regulation A		\$ 0.00
	Rule 504		\$ 0.00
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.	e ·.	
	Transfer Agent's Fees		§ 200.00
	Printing and Engraving Costs	_	\$ 0.00
	Legal Fees		\$ 1,040.00
	Accounting Fees		
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)	-	\$ 0.00
	Other Expenses (identify)	-	7 \$
	Total	_	\$ 1,240.00

b. Enter the difference between the aggregate offering price given in response to Part C — C and total expenses furnished in response to Part C — Question 4.a. This difference is the "adju proceeds to the issuer."	sted gross	<u>88,760</u>
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be each of the purposes shown. If the amount for any purpose is not known, furnish an est check the box to the left of the estimate. The total of the payments listed must equal the adjuproceeds to the issuer set forth in response to Part C — Question 4.b above.	imate and	
	Payments to	
	Officers, Directors, & Affiliates	Payments t Others
Salaries and fees		_ 🗆 \$
Purchase of real estate		_ 🗆 \$
Purchase, rental or leasing and installation of machinery and equipment		□\$
Construction or leasing of plant buildings and facilities		
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	_	
Repayment of indebtedness		
Working capital		
Other (specify):		
	 []\$	_ 🗆 🕏
Column Totals	s <u>0.00</u>	
Total Payments Listed (column totals added)	s_	0.00
D. FEDERAL SIGNATURE		
ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If		

sig the

issuer (Print or Type)	Signature	Date
AMERICAN KIOSK CORPORATION	Matellaler	10-2-05
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Martin A. Palcios	President MAATIX A	1. BALACIOS

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No EX

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
AMERICAN KIOSK CORPORATION	That It ale	10-7-05
Name (Print or Type)	Title (Print or Type)	
Martin A. Palcios	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
1	Intend to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Finvestor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR		Company across 1 to 7 of lands prompting, and quantization from							
CA									
со									
СТ									
DE		, a regge of state transmission (specifical							
DC									
FL									
GA									
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ME	and the state of t						_		
MD									
MA]	
Mi									
MN									
MS									

APPENDIX 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No MO MT NE NV NH NJ NM $\cdot NY$ NC ND OH OK OR PA RI SC SD TN TX UT VT VAWA WV WI

1	to non-a	2 I to sell accredited s in State	Type of security and aggregate offering price offered in state		4 Type of investor and amount purchased in State (Part C-Item 2)				lification ate ULOE , attach ation of granted)
State	Yes	-Item 1) No	(Part C-Item 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY PR		:							